

GIC Health Plan Rates – Monthly Rates *as of July 1, 2010*

For THE TOWN OF WEYMOUTH ENROLLEES



Commonwealth of Massachusetts
Group Insurance Commission

Active Employees, Retirees, and Survivors *WITHOUT MEDICARE*

Includes 0.33% Administrative Fee



	TEACHER Who Retired Before November 24, 2008			EMPLOYEE and Non-Medicare Retiree/Survivor		
	Pays Monthly %	Pays Monthly \$	Pays Monthly \$	Pays Monthly %	Pays Monthly \$	Pays Monthly \$
HEALTH PLAN		Individual Coverage	Family Coverage		Individual Coverage	Family Coverage
Fallon Community Health Plan Direct Care	17.75%	\$ 73.89	\$177.32	17.75%	\$ 73.89	\$177.32
Fallon Community Health Plan Select Care	17.75%	88.63	212.69	17.75%	88.63	212.69
Harvard Pilgrim Independence Plan	17.75%	107.39	262.31	17.75%	107.39	262.31
Harvard Pilgrim Primary Choice Plan	17.75%	85.23	208.18	17.75%	85.23	208.18
Health New England	17.75%	73.73	182.77	17.75%	73.73	182.77
Tufts Health Plan Navigator	17.75%	103.27	250.75	17.75%	103.27	250.75
Tufts Health Plan Spirit	17.75%	81.97	199.01	17.75%	81.97	199.01
NHP Care (<i>Neighborhood Health Plan</i>)	17.75%	73.65	195.15	17.75%	73.65	195.15
UniCare State Indemnity Plan/Basic <i>with</i> CIC (<i>Comprehensive</i>)	20%	161.31	376.60	20%	161.31	376.60
UniCare State Indemnity Plan/Basic <i>without</i> CIC (<i>Non-Comprehensive</i>)	20%	153.87	359.36	20%	153.87	359.36
UniCare State Indemnity Plan/ Community Choice	17.75%	72.42	173.79	17.75%	72.42	173.79
UniCare State Indemnity Plan/PLUS	17.75%	99.91	238.43	17.75%	99.91	238.43

Retirees and Survivors *WITH MEDICARE*

	TEACHER Who Retired Before November 24, 2008		RETIREE AND SURVIVOR	
	Pays Monthly Per Person		Pays Monthly Per Person	
HEALTH PLAN	%	\$	%	\$
Fallon Senior Plan*	12.5%	\$ 28.28	12.5%	\$ 28.28
Harvard Pilgrim Medicare Enhance	12.5%	47.44	12.5%	47.44
Health New England MedPlus	12.5%	45.42	12.5%	45.42
Tufts Health Plan Medicare Complement	12.5%	43.99	12.5%	43.99
Tufts Health Plan Medicare Preferred*	12.5%	27.91	12.5%	27.91
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with</i> CIC (<i>Comprehensive</i>)	12.5%	44.13	12.5%	44.13
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without</i> CIC (<i>Non-Comprehensive</i>)	12.5%	42.80	12.5%	42.80

* Rates are subject to federal approval and may change January 1, 2011.

Rates are Calculated by the Town of Weymouth Benefits Office.

**Rate questions? Call: Town of Weymouth Retirees – Weymouth Retirement Board 781.331.8721
Active Employees and MTRS – Human Resources 781.340.5010**